

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		8-28-01
O.I.P.E. CLASSIFIER		19	9-5-01
FORMALITY REVIEW	JA	361113	9-26-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

09/938802
 BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓	35	9/15
2	✓	36	9/15
3	✓	37	9/15
4	✓	38	9/15
5	✓	39	9/15
6	✓	40	9/15
7	✓	41	9/15
8	✓	42	9/15
9	✓	43	9/15
10	✓	44	9/15
11	✓	45	9/15
12	✓	46	9/15
13	✓	47	9/15
14	✓	48	9/15
15	✓	49	9/15
16	✓	50	9/15
17	✓	51	9/15
18	✓	52	9/15
19	✓	53	9/15
20	✓	54	9/15
21	✓	55	9/15
22	✓	56	9/15
23	✓	57	9/15
24	✓	58	9/15
25	✓	59	9/15
26	✓	60	9/15
27	✓	61	9/15
28	✓	62	9/15
29	✓	63	9/15
30	✓	64	9/15
31	✓	65	9/15
32	✓	66	9/15
33	✓	67	9/15
34	✓	68	9/15
35	✓	69	9/15
36	✓	70	9/15
37	✓	71	9/15
38	✓	72	9/15
39	✓	73	9/15
40	✓	74	9/15
41	✓	75	9/15
42	✓	76	9/15
43	✓	77	9/15
44	✓	78	9/15
45	✓	79	9/15
46	✓	80	9/15
47	✓	81	9/15
48	✓	82	9/15
49	✓	83	9/15
50	✓	84	9/15

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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